



IF u!

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/606,664  
Applicant: Michael NALLY, et al.  
Filed: 06/26/2003  
TC/AU: 2816  
Examiner: Margaret R. Wambach

Confirmation No. 4708

Docket No.: 57471/03-012  
Customer No.: 22206

MAIL STOP AMENDMENT  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Dear Sir:

*Introductory Comments*

01/07/2005 TDAWKINS 00000001 060540 10606664

01 FC:1201 200.00 \$ This paper is submitted in timely response to the Official Action mailed September 20, 2004.

Please consider this paper to constitute a Conditional Petition for Extension of Time for the appropriate length of time should such be required. If any additional fee is required by virtue of the filing of this paper, please also consider this a general authorization to charge Deposit Account No. 06-0540 for the same.

Please amend the above-identified application as follows:

---

CERTIFICATION UNDER 37 C.F.R. § 1.8(a)

I hereby certify that, on the date shown below, this correspondence is being deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 with sufficient postage as first class mail.

Date: 12/13/2004

Nancy J. Moore  
Nancy J. Moore

\* \* \* \* \*

This paper is intended to constitute a complete response to the outstanding Office Action. Please contact the undersigned if it appears that a portion of this response is missing or if there remain any additional matters to resolve. If the Examiner feels that processing of the application can be expedited in any respect by a personal conference, please consider this an invitation to contact the undersigned by phone.

Respectfully submitted,

Date: \_\_\_\_\_

12-13-04

Telephone No.: (918) 599-0621  
Facsimile No.: (918) 583-9659



James F. Lea III, Reg. No. 41,143  
FELLERS, SNIDER, BLANKENSHIP,  
BAILEY & TIPPENS, P.C.  
321 South Boston, Suite 800  
Tulsa, OK 74103-3318

Attorney for Applicants

# PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

10606664

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	16	20	=
Independent (37 CFR 1.16(b))	4	3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ 200 =	200
+ \$ _____ =	
TOTAL ADD'L FEE	200

pd.

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))			=
Independent (37 CFR 1.16(b))			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))			=
Independent (37 CFR 1.16(b))			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.